

PEABODY MILL ENVIRONMENTAL CENTER PROGRAM REGISTRATION

Please fill out a separate form for each person and each class, except for families where parent will be in attendance. Fees vary depending on program.

Make checks payable to PMEC (Peabody Mill Environmental Center).

NAME OF PROGRAM _____ PROGRAM DATE _____

NAME(s) _____

MAILING ADDRESS _____

EMAIL ADDRESS _____

PHONE NUMBER(S) _____

IF UNDER 18: AGE _____ PARENT'S NAME(S) _____

RELEASE/EMERGENCY INFORMATION

In case of injury, medical authorities will not undertake any treatment without consent. This form allows for such medical care should you not be available to give permission. It will be kept by the teacher in case of emergency. The undersigned person or parent/guardian agrees to indemnify and hold harmless the Town of Amherst, Amherst Conservation Commission, teachers, and all other people helping with the program for damages resulting to myself or my daughter/son while participating in Peabody Mill Environmental Center activities or while in transit to and from these activities. Furthermore, I agree to have myself or son/daughter treated for emergency medical or dental problems that should result from injuries received, provided such treatment is advised by a licensed physician or dentist. I accept full responsibility for all costs of such treatment.

PARTICIPANT SIGNATURE _____

Parent/Guardian Signature (if under 18) _____

Home Phone _____ Work Phone _____

2nd Emergency Contact _____ Phone _____

Physician _____ Phone _____

Other emergency/medical information _____

Please sign and date here if you do NOT want us to use photos and/or videos of you/ your child internally and in PMEC promotional materials.

Signature _____ Date _____

Please mail form and check to: PMEC, PO Box 1045, Amherst, NH 03031.
For information call 673-1141.

2/24/07